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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No. SHE-6933

First Inventor Shlomo Gabbay

Title LOW PROFILE HEART VALVE PROSTHESIS

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Expres	s Mail Label No. E	U51699	5670l	JS	
APPLICA	ATION ELEMENTS	ADI		il Stop Patent mmissioner fo			PT(02
See MPEP chapter 600 con	cerning utility patent application contents.		P.C). Box 1450 xandria. VA 2			8. 70
1. Submit an original and a	Form (e.g., PTO/SB/17) shuplicate for fee processing) mall entity status.		CD-ROM or CD-R Computer Program deotide and/or Amino	n (<i>Appendi</i> Acid Sequ	x)		J782
3. Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Reg - Reference to so or a computer - Background of - Brief Summany - Brief Descriptic - Detailed Descriptic - Claim(s) - Abstract of the 4. Drawing(s) (35 to 5. Oath or Declaration a. Newly exect Copy from a (for continue) i. DELET Signed st	b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) atom Sedosure C. 113) [Total Sheets 02] [Total Pages 02] d (original or copy) ior application (37 CFR 1.63 (d)) indivisional with Box 18 completed) NO OF INVENTOR(S) nent attached deleting inventor(s) prior application, see 37 CFR b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of (when there is an assignee) 10. Information Disclosure Statement (IDS)/PTO-1449 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122						
6. Application Data	Sheet. See 37 CFR 1.76	17.	or its equivalent. Other:				
or in an Application Data Sh Continuation Prior application information: For CONTINUATION OR DIVIS Box 5b, is considered a part of	ICATION, check appropriate box, and supper under 37 CFR 1.76: Divisional Continuation-in-part (CIP) Examiner IONAL APPS only: The entire disclosure of the disclosure of the accompanying continuation when a portion has been inadvi	the prior app	of prior application No.: Group Art Unit: lication, from which an o visional application and	oath or dec	laration ncorpor	is supplied	- under
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Customer Number or Bar C	Code Label		or	Correspor	ndence ac	idress below	
Name	Gary J. Pitzer						
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Name (Print/Type)	Oary J. Pitzer	Rea	istration No. (Attorne	y/Agent)	39,33	34	
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FEE TRANSMITTAL for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 421.00 TOTAL AMOUNT OF PAYMENT TOTAL AMOUNT OF PAYMENT TOTAL SMITTAL Complete if Known Application Number Filing Date First Named Inventor Examiner Name Art Unit Attorney Docket No. SHE-6933

METH	OD OF PAYMENT (check all that apply)	OF PAYMENT (check all that apply) FEE CALCULATION (continu				CALCULATION (continued)	
Check Credit card Money Other None			DDITI	ONAL	. FEE	S	
	Order Content	Large	Entity	Small	Entity		
Deposit	Account:	Fee			Fee	Fee Description	
Account	20-0090	Code 1051	(\$) 130	Code 2051		Sumbarra lata filing foo or oath	Fee Paid
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Account	Tarolli, Sundheim, Covell	1052	50	2052	25	over sheet	
Name The Director is	s authorized to: (check all that apply)	1053	130	1053		Non-English specification	
	(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any	additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee	(s) indicated below, except for the filing fee	1805	1,840*	1805	1.840*	Requesting publication of SIR after	
to the above-id	entified deposit account.		.,		.,	Examiner action	
	FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE			420	2252	210	Extension for reply within second month	
Large Entity S		1253	950	2253	475	Extension for reply within third month	
	Fee Fee Fee Description Fee Paid Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770	2001 385 Utility filing fee 385.00	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170 Design filing fee 365.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160	2005 : 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	SUBTOTAL (1) (\$) 385.00	1452	110	2452	55	Petition to revive - unavoidable	
		1453	1,330	2453	665	Petition to revive - unintentional	L
2. EXTRA C	CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
	Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims Independent	22 -20** = 02 x 18 = 36	1503	640	2503	320	Plant issue fee	
Claims	03 - 3** = 0 x 86 = 0	1460	130	1460	130	Petitions to the Commissioner	
Multiple Deper	ndent =	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity		1806	180	1806		Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee <u>Fee Description</u> Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18	2202 9 Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection	
1201 86	2201 43 Independent claims in excess of 3					(37 ČFR 1.129(a))	<u> </u>
1203 290	2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86	2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18	2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
l	SUBTOTAL (2) (\$) 36.00	Other	fee (sp	ecify) _	<u>-</u>		
**or numbe	SUBTOTAL (2) [(\$) 36.00 r previously paid, if greater, For Reissues, see above	*Red	uced by	Basic f	Filing F	ee Paid SUBTOTAL (3) (\$) 0.00	

SUBMITTED BY		12000 10		(Complete (if applicable))		
Name (Print/Type)	Galv J. Pitzer	11	Registration No. (Attorney/Agent)	39,334	Telephone	216.621.2234
Signature	at Jan	T			Date	February 19, 2004

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